

**CENTER FOR LIFE RESOURCES**

*Providing services and opportunities for enhancing  
the quality of life for the people of Central Texas*

**Local Provider Network Development Plan**

*Fiscal Year 2026 - 2027*

## **PREFACE**

The purpose of the Center for Life Resources (Center) Intellectual and Developmental Disabilities (IDD) Local Provider Network Development Plan (Plan) is to define a plan that communicates the mission, vision, values, goals, and objectives throughout the organization. The Plan furthers the Center's development by providing a framework to accomplish those goals and objectives. The Plan describes the Center's IDD programs and services. The Plan is designed to be responsive to community and individual needs and improve individual outcomes.

The Plan represents a collaborative effort. All parts of the organization contributed to its development. The Center's goals and objectives to include IDD were developed by the Executive Leadership Team (ELT) from reviewing the following: Fiscal Year (FY) 2026-2027. Performance Contracts: input from the Planning and Network Advisory Committee (PNAC), individuals and community representatives, staff through department and unit meetings, and the QM and UM Committees. The Plan is comprehensive and integrates all the planning requirements in the Texas Health and Human Services Commission (HHSC) IDD Division Performance Contracts.

## **CENTER LEADERSHIP**

### **Governance**

A Board of Trustees (Board), comprised of nine members, is responsible for the effective administration of the Center and makes policy consistent with the department's rules and standards. The Board has the authority and responsibility within the local service area for planning, policy development, fiscal oversight, and ensuring the provision of mental health and Intellectual and Developmental Disabilities Services. The Center is considered a unit of local government. The Center's Board has representatives from each county of the local service area. Trustees are appointed by their County Commissioner's Court and the Brownwood City Council. The Board of Trustees hires and oversees the Executive Director.

### **Executive Director**

The Executive Director is the Chief Executive Officer appointed by and responsible to the Board. The Executive Director is responsible for the Center's infrastructure, functions, resources, services, planning, implementation, monitoring, evaluation, and administrative supervision of all staff and operations. In addition, the Executive Director directly supervises the Executive Leadership Team.

## **INDIVIDUAL AND COMMUNITY INVOLVEMENT**

The Center's IDD Services is an integral part of the communities it serves. Therefore, communication between the Center, individuals, families, and the community is encouraged and facilitated. The Center is responsive to the community's needs, delivers services most effectively and efficiently, and ensures legal and human rights protection of the individuals served.

### **Planning and Network Advisory Committee**

The Planning and Network Advisory Committee (PNAC) serves MH and IDD interests. The PNAC meets quarterly and as needed to provide broad-based community input into the planning process and the Center's growth. The Center strives for committee membership that reflects the ethnic, cultural, and social diversity of the local service area (LSA) and includes individual and family representation. The role of the PNAC is to reflect the perspectives of individuals, family members, and other stakeholders on providing services and support.

The "Guidelines for Local Service Area Planning" received by the Center on February 28, 2005, provides expected outcomes for the PNAC. Therefore, the Board shall establish outcomes and reporting requirements for the PNAC. The expected outcomes of the PNAC include:

- The PNAC operates according to the charge assigned by the local board, and
- Individuals of adult mental health, children's mental health, and intellectual and developmental disabilities services, and their families or guardians are represented, and their views are explicitly incorporated into recommendations of the PNAC

The PNAC is charged with the following:

- Identify the needs and priorities of the local service area;
- Submit recommendations to the Center staff and Board regarding the content, development, and implementation of the Local Service Area Plan and budget strategies to meet the community needs and priorities and
- Provide input in assembling a network of available and appropriate service providers to meet the needs of individuals in the local service area while considering public input, ultimate cost-benefit, and individual care issues to ensure individual choice and the best use of public money.
- Receive a written copy of the final annual budget and biennial plan for each program area as approved by the Board of Trustees and a written explanation of any variance from the PNAC's recommendations.
- Receive information regarding total funds available through the Performance Contract document for services in each program area and required performance targets and outcomes.
- Reports to the Board of Trustees at least quarterly on issues related to the needs and priorities of the local service area; implementation of plans and contracts; and the PNAC's actions that respond to special assignments given to the PNAC by the Board of Trustees.

The Center provides initial and ongoing training to the committee members. The training provides members with the information they need to perform the tasks and fulfill the committee's purpose. In addition, the Center will attempt to recruit family members of children or adolescent individuals to serve on the PNAC.

## **Community**

The community, individuals, and family members not participating in advisory committees have several ways to provide planning input, assess services and supports, and submit recommendations for consideration. Opportunities for giving input and determining community needs and priorities are as follows: interviews with Center and State staff, complaint process with Rights Protection Officer (RPO), individual satisfaction survey cards at all service sites, advocacy meetings, individual and family community forums, citizen comments at the Board of Trustees meetings and public forums.

## LOCAL PLANNING PROCESS AND PLAN REVIEW

### Local Planning Process

The local planning process is based on the Guidelines for Local Service Area Planning (LSAP Guidelines) dated February 28, 2005. The local planning process focuses on obtaining public input and addressing items identified in the Texas Health and Safety Code (THSC) 533.0354. The THSC §533.354(d) (2) specifies that the Center, in developing the local service area plan, will consider the following identified items:

1. Criteria for ensuring accountability for, the cost-effectiveness of, and relative value of service delivery options
  - The Center ensures accountability for service delivery options by monitoring the service contracts to ensure statutory, regulatory, and contractual requirements are met.
  - The Center ensures accountability for service delivery options by evaluating the required documentation elements and making revisions when changes occur.
  - The Center's Quality Management (QM) and Utilization Management (UM) committees review Mental and Behavioral Health Outpatient Warehouse (MBOW) reports and electronic health record (EHR) reports and recommend cost-effective corrective actions implemented by management. In addition, the IDD management team addresses issues related to cost-effectiveness and the relative value of services.
  - Relative (best) value is not just about cost-effectiveness. The Center considers access, choice, outcomes (e.g., satisfaction), service availability, service provider's ability to meet regulatory requirements, service provider capacity, and relevant factors.
  
2. Goals to ensure that an individual with intellectual and developmental disabilities is placed in the least restrictive environment appropriate to the person's care
  - A service coordination assessment is completed upon intake and at least annually, addressing the least restrictive environment appropriate to the person's care.
  - A verification of freedom of choice form is completed for persons eligible for waiver programs that offer various placement options. In addition, a special planning meeting is held to address the need for changes in the person's living environment.
  - A service coordinator oversees the permanency planning process to keep minors living with their natural supports.
  - The Center provides continuity of care to individuals in State Supported Living Centers (SSLCs) from our counties.

3. Opportunities for innovation to ensure that the Local Authority is communicating to all potential and incoming individuals about the availability of services of State Supported Living Centers for persons with intellectual and developmental disabilities in the local services areas of the Local Authority
  - Services of State Supported Living Centers are explained upon entry into services and when individual needs change. The identification of preferences form lists State Supported Living Center facilities as a preference is provided to the individual or their legally authorized person annually.
  
4. Goals to divert individuals of services from the criminal justice system
  - The Center operates various crisis services, including the IDD Crisis Specialist, Mobile Crisis Outreach Team, and Community Response Team, all committed to jail diversion.
  - The Center provides crisis screening and assessment for
  - The Center employs a Jail Navigator who works at Brown County Jail, screens individuals at booking, and offers services to individuals in jail or detention.
  - The Center assists Community Supervision and Corrections Department (CSCD) personnel to coordinate supervision for offenders who are Center clients. In addition, the Center provides technical assistance training to CSCD and other criminal justice entities regarding early identification, intervention, and how to access the Center for adults and juveniles.
  - The Center assists local and county jails with identifying offenders with a history of State mental health/IDD care and the continuity of care of offenders with a history of state mental health care. The liaison coordinates with the intellectual and developmental disabilities section regarding the individuals in jail.
  
5. Opportunities for innovation in services and service delivery
  - The Center coordinates with the Aging and Disability Resource Center, Center for Independent Living, Transportation Coalition, 211, CRCCG, and other local groups to ensure collaboration and intersection of appropriate services.
  - The information derived from the local planning process is used to develop the local plan to include quality improvement initiatives, goals, and objectives.

## **Plan Review**

Through the various information-gathering tools, staff members, individuals, PNAC, and community stakeholders have numerous means of providing input to the Plan review process. Their input is assessed and integrated into the planning cycle. Through their input, there is an ongoing process of evaluating service delivery, capturing emerging needs, and changing priorities. In addition, individuals and community stakeholders will access the planning cycle through the Planning Advisory Committee, public forums, focus groups, and Board of Trustees meetings.

## DESCRIPTION OF SERVICES

### Service Area

The Center is one of 39 Community Mental Health and Intellectual and Developmental Disabilities Centers in Texas. The Center's programs are responsible for the delivery of a broad array of services within our catchment.

### Intellectual and Developmental Disabilities Populations Served

Because demand for services and support exceeds available resources, delivery of services is prioritized following published directives and needs. The HHSC IDD priority population for Intellectual and Developmental Disabilities Service consists of individuals who meet one or more of the following descriptions:

- Persons with IDD, as defined by Texas Health and Safety Code §591.003;
- Persons with pervasive developmental disorders (PDD) as defined in the current edition of the Diagnostic and Statistical Manual, including autism;
- Persons with related conditions who are eligible for services in Medicaid programs operated by HHSC, including the ICF/IDD and waiver programs;
- Children who are eligible for services from the Early Childhood Intervention Interagency Council or
- Nursing facility residents who are eligible for specialized services for IDD or a related condition according to Section 1919(e)(7) of the Social Security Act

### Intellectual and Developmental Disabilities Services

A full range of Intellectual and Developmental Disabilities services are available to the individuals of the communities served by the Center. Professional diagnostic, therapeutic, and rehabilitation services are provided. Individual services may involve:

- Service Coordination: Assistance in accessing medical, social, educational, and other appropriate services and supports that will help an individual achieve a quality of life and community participation acceptable to the individual as described in the Plan of Services and Supports.
- Habilitation Coordination: Assistance for an individual residing in a nursing facility to access appropriate specialized services necessary to achieve a quality of life and level of community participation acceptable to the individual and LAR on the individual's behalf.

- Crisis Services: Mental Health services are provided to individuals determined through an initial screening to need crisis services. This service includes crisis intervention and monitoring the individual until the crisis is resolved or the individual is placed in a clinically appropriate environment. The crisis hotline and the mobile crisis intervention team are used during emergencies. The crisis hotline is a continuously available staffed telephone service providing information, support, and referrals to callers twenty-four (24) hours per day, seven days per week. The mobile crisis intervention team offers face-to-face, out-of-office crisis intervention/support services to assist individuals and families in managing an identified crisis. Crisis Services will be expanded with the implementation of new funds.
- Respite Services: Services provided for temporary, short-term, periodic relief of primary caregivers.
- Skills Training: Training individuals in mental health services in skills that will help further their independent functioning in the community. This training promotes community integration, increases community tenure, and maintains the individual's quality of life.
- Supported Employment: Supported employment is provided to an individual who has paid, individualized, competitive employment in the community to help the individual sustain that employment.
- Community Support: Individualized activities that are consistent with the individual's person-directed plan and provided in the individual's home and at community locations
- Vocational Apprenticeship Program: Apprenticeships to learn transferable job skills needed to enter the competitive job market.
- Individual Skills and Socialization Program: Assistance with acquiring, retaining, or improving self-help, socialization, and adaptive skills necessary to live successfully in the community and participate in home and community life.

### **Service Delivery System**

- Entry to Services: Individuals seeking Intellectual and Developmental Disabilities Services go through an assessment or endorsement conducted following THSC §593.005 and 25 TAC Chapter 415, Subchapter D to determine if an individual has IDD or is a member of the HHSC IDD priority population. Once eligible, an individual is assigned a service coordinator in IDD.
- Other Assessments: The Service Coordinator determines the individual's need for IDD Service Coordination by completing a Service Coordination Assessment – IDD Services form.

- Person-Directed Plan: A personal-directed plan for individuals with Intellectual and Developmental Disabilities is developed. The plan identifies training and support services that address the needs and preferences of the individual and builds on the individual's strengths. The personally directed plans are reviewed as prescribed by Texas Administrative Codes, and new plans are developed.
- Referrals: Referrals are made to internal or external providers and other community resources for services identified within the plan.
- Continuity of Care: The Center strives to provide care systematically, continuously, and seamlessly that meets the individual's needs. The quality of individual care is assessed continually through progress reviews of treatment/personal outcome plans, and actions are taken to improve individual care.
- Discharge Plan: A discharge plan is developed when an individual leaves Center services; it ensures the individual will be assisted in the community through other resources or providers. The Center provides authority and provider services to individuals. Required (R) services are services the Center is mandated to provide through the HHSC Performance Contracts.

## **Service Priorities**

There are services required by legislation to be provided by all local authorities for Intellectual and Developmental Disabilities Service. These services are noted with an "R" in the respective service description section. The Center provides those marked with an asterisk.

## **Intellectual and Developmental Disabilities Services & Utilization Administrative Services**

The Center's administrative services include financial and accounting, budgeting, contract management, purchasing and supply, billing and reimbursement, facility management, public information, information management, human resources, risk management, quality management, utilization management, individual rights, and staff development.

## **Resource Development and Allocation**

The Center's primary funding comes from State general revenue, block grant funds, local match funds, and Medicaid-earned income. The timely and effective development of resources in support of Center programs and operations is paramount. Additional support and revenue must be generated beyond existing resources to sustain current services against inflationary erosion and, if possible, grow the level of services and support to an improved level. Components of the Center's resource development initiative include:

Network Development:	For cost-effectiveness and individual choice, the Center contracts with a network of providers. Most of our IDD services are delivered by Center employees. On rare occasions, we have contracted for IDD Respite with clients who could not receive services at our site-based program.
Utilization Review & Management:	<p>Center resource utilization becomes more focused and productive through Utilization Review and Utilization Management processes and analyses.</p> <p>Utilization Management monitors services and determines if services are being provided most effectively. In addition, Utilization Management monitors third-party payments and their management to ensure accurate and timely billing. Finally, the IDD Authority Unit evaluates the effectiveness of the authorization process.</p>
Grants:	Solicitation of funding through various grant programs continues at the Center when deemed appropriate.
Third-Party Billing:	An effective administrative and clinical process aggressively monitors and supports the management of third-party billing. Services to individuals on Medicaid or with third-party billing are maximized to augment this revenue stream. An Individual Benefits Assistance program is in place to increase the number of Medicaid-eligible service recipients. Strategies are in place to increase direct service time by service providers to maximize Medicaid-earned revenue. Electronic billing has enabled the Center to expedite the payment process. The Center's Integrity and Compliance Committee monitors and makes recommendations for improving the billing process. The IDD Authority Unit continues to monitor Targeted Case Management billing through QM activities.
Collaboration with other Service Providers	The Center participates in the Community Resource Coordination Groups for Children and Adults by providing at least one representative to each group with authority and expertise in IDD services—Medicaid Waiver Providers contract with the Center to provide day habilitation services to their individuals. The IDD Authority Unit coordinates with the HCS and TxHmL providers to implement regulatory changes with the local authority functions as needed.
Volunteers	As established by the Center's organizational by-laws, volunteers are recruited to work with the staff to help provide cost-effective and beneficial services to our customers.

## **Communities' Needs and Priorities**

The purpose of local planning is to identify community needs and priorities. Community needs are identified through public forums, focus groups, Board of Trustees meetings, the Center's performance data, quality improvement efforts, and the PNACs. HHSC requires the Center to solicit information regarding community needs from individuals of community-based services and state-supported living centers, local community representatives, and other interested persons to inform the local service area plan. The Center asked the general public, through public forums, surveys, and focus groups, to identify services and supports the Center should be provided to the local community.

The Center reviews the community's needs as identified in the local planning process and integrates them into its goals, objectives, and department initiatives as much as possible. Those identified needs that could not be integrated will continue to be prioritized and assessed for feasibility for future planning initiatives.

## **Service Capacity and Access to Services**

IDD Services are provided in the office and community locations across our counties. Day Habilitation and Respite programming is based out of the Brownwood location. IDD Services provides some transportation for clients to participate in site-based services when possible. Service Coordination caseloads are reviewed and revised based on the number of individuals and individual demographics to ensure maximum service capacity and improve service access. For some time, local demand and limited resources have forced the Center to have a waiting list for services for clients who are not Medicaid recipients.

## **Areas of Focus FY26-27**

The Planning and Network Advisory Committee will continue to improve client and community input into service planning and evaluation through surveys and other necessary tools. In addition, the Committee will review the plan and strategies indicated in this plan to determine its effectiveness and identify service gaps for the IDD population.